

KENTUCKY REGISTRY OF ELECTION FINANCE

140 WALNUT STREET, FRANKFORT, KENTUCKY 40601-3240

(502) 573-2226 / FAX (502) 573-5622

www.kref.ky.gov

Page 1 of **ELECTION FINANCE STATEMENT - COVER PAGE**

(Please type or print)

This Space for Registry Use Only

1. Candidate/Slate of Candidates : _____
Committee Name: _____
Date of Birth: ____/____/____ KREF Filer # _____
Office Sought: _____
District/Division Number: _____
County of Residence: _____
Political Party: _____

Logged _____ Keyed _____

Election Status: W L

Candidate Status:

INELG

WD

DD

T

Reporting Status:

S Only

Debt Only

S/D

☐ Continue to G

TFC

2. Candidate/Slate of Candidates/Committee Mailing Address:

Daytime Phone Number: (____)____-_____

3. Treasurer's Name and Mailing Address:

Daytime Phone Number: (____)____-_____

4. This Statement Covers:

From: _____

Month - Day - Year

To: _____

Month - Day - Year

INCLUDE INFORMATION FOR THIS ELECTION ONLY

5. Date of Election: _____

Month-Day-Year

This Statement relates to: ☐ Primary ☐ General ☐ Special
☐ Run-off Primary

6. Type of Statement

a. ☐ Quarterlyb. ☐ 32-day Pre-Electionc. ☐ 15-day Pre-Electiond. ☐ 30-day Post-Electione. ☐ 60-day Post-Election Supplementalf. ☐ Annual Supplementalg. ☐ Termination _____

Month-Day-Year

h. ☐ AMENDMENT - Check one of the items above
to indicate which statement is being amended.**NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this statement to the penalties of KRS 121.990.**

7. Verification: I certify that I have examined this Election Finance Statement and to the best of my knowledge and belief it is true, correct, and complete.

Candidate or

Treasurer: _____ Date: _____

Type or Print Name

Authorized Signature

Month-Day-Year

SUMMARY PAGE

Page 2 of

Candidate/Slate of Candidates/Committee: _____

KREF Filer #: _____ Period From: ____/____/____ To: ____/____/____

RECEIPTS		COLUMN 1	COLUMN 2
1.	CONTRIBUTIONS: (including all receipts from Fundraisers)	(This Period)	(Cumulative This Election)
	a. Itemized by check or written instrument (Schedule 1A, Item 4a)	\$ _____	\$ _____
	b. Other receipts (Schedule 1A, Item 4c)	+\$ _____	\$ _____
	c. Receipts in currency (Number of people _____) (Individual cash contribution limit is \$50)	+\$ _____	\$ _____
	d. Anonymous (Number of people _____) (Maximum \$50 per contribution)	+\$ _____	\$ _____ (\$1,000 Maximum Per Election)
	e. Unitemized contributions (Number of people _____) (Contributions by check of \$100 or less)	+\$ _____	\$ _____
	f. Political Action Committee (PAC) contributions (Schedule 1B, Item 4a)	+\$ _____	\$ _____
	g. Executive Committee contributions (Schedule 1C, Item 3a)	+\$ _____	\$ _____
	h. Caucus Campaign Committee contributions (Schedule 1D, Item 3a)	+\$ _____	\$ _____
2.	TOTAL RECEIPTS	= \$ _____	\$ _____
DISBURSEMENTS			
3.	TOTAL DISBURSEMENTS (Schedule 2, Item 4)	\$ _____	
IN-KIND CONTRIBUTIONS			
4.	a. In-kind Contributions Received (Schedule 1A, Item 4b)	\$ _____	\$ _____
	b. In-kind Contributions Received (PAC) (Schedule 1B, Item 4b)	\$ _____	\$ _____
	c. In-kind Contributions Received (Executive Com.) (Schedule 1C, Item 3b)	\$ _____	\$ _____
	d. In-kind Contributions Received (Caucus Campaign Com.) (Schedule 1D, Item 3b)	\$ _____	\$ _____
DEBTS AND OBLIGATIONS			
5.	TOTAL DEBTS AND OBLIGATIONS (Schedule 4, Item 7)	\$ _____	
BALANCE STATEMENT			
6.	Ending balance of previous report (Enter -0- if no previous report)	\$ _____	No change since last report <input type="checkbox"/> (check if applicable) <i>If nothing of value has been received and no expenditures have been made since the last report, list the Ending Balance line 10 amount from the last report as the Ending Balance line 10 amount on this report.</i>
7.	Add total receipts during reporting period (Line 2, Column 1)	+\$ _____	
8.	Sub-Total (Add lines 6 and 7)	= \$ _____	
9.	Subtract total disbursements during reporting period (Line 3, Column 1)	-\$ _____	
10.	ENDING BALANCE (Subtract Line 9 from Line 8)	= \$ _____	

RECEIPTS SCHEDULE 1A

Page ____ of ____

Receipts in Excess of \$100 Must be Itemized

Candidate/Slate of Candidates/Committee: _____

KREF Filer #: _____ Period From: ____/____/____ To: ____/____/____

1. Contributor Name and Address Contributor Occupation and Employer Spouse's Name, Occupation and Employer	1b. Marital Status	2. Date of Receipt ____/____/____ 3. Type of Contribution <input type="checkbox"/> Direct from Candidate <input type="checkbox"/> Loan from Candidate <input type="checkbox"/> Direct from a person or authorized entity <input type="checkbox"/> Fundraising Event <input type="checkbox"/> Fundraiser (person) <input type="checkbox"/> In-kind <input type="checkbox"/> Other: _____	4a. Contribution by Check or Written Instrument	4b. Description and Value of In-Kind	4c. Other Receipts	5. Cumulative for Election (per Contributor)

SUBTOTAL THIS PAGE			
TOTAL THIS PERIOD (Only on last page of Schedule)	Enter this total on Col. 1, line 1a of Summary Page	Enter this total on Col. 1, line 4a of Summary Page	Enter this total on Col. 1, line 1b of Summary Page

PAC RECEIPTS SCHEDULE 1B

Page ____ of ____

Receipts from PACs must be itemized regardless of amount

Candidate/Slate of Candidates/Committee: _____

KREF Filer #: _____ Period From: ____/____/____ To: ____/____/____

1. Permanent Committee Name and Address ----- 2. Major business, social, or political interest represented by committee	3. Date of Receipt ____/____/____	4a. Contribution by Check or Written Instrument	4b. Description and Value of In-Kind	5. Cumulative for Election (per Contributor)
	____/____/____			
	____/____/____			
	____/____/____			
	____/____/____			
	____/____/____			

SUBTOTAL THIS PAGE		
TOTAL THIS PERIOD (Only on last page of Schedule)	_____ Enter this total on Col. 1, line 1f of Summary Page	_____ Enter this total on Col. 1, line 4b of Summary Page

EXECUTIVE COMMITTEE RECEIPTS SCHEDULE 1C

Page ____ of ____

Receipts in Excess of \$100 Must be Itemized

Candidate/Slate of Candidates/Committee: _____

KREF Filer #: _____ Period From: ____/____/____ To: ____/____/____

1. Executive Committee Name and Address	2. Date of Receipt	3a. Contribution by Check or Written Instrument	3b. Description and Value of In-Kind	4. Cumulative for Election (per Contributor)
	____/____/____			
	____/____/____			
	____/____/____			
	____/____/____			
	____/____/____			

SUBTOTAL THIS PAGE**5. Total Cash and Unitemized Executive Committee Contributions**

Cash _____ + Unitemized _____ =

Number of Cash Receipts _____ Number of Unitemized Receipts _____

TOTAL THIS PERIOD
(Only on last page of Schedule)\$ _____
Enter this total on Col. 1,
line 1g of Summary Page\$ _____
Enter this total on Col. 1,
line 4c of Summary Page

CAUCUS CAMPAIGN COMMITTEE RECEIPTS SCHEDULE 1D

Page ____ of ____

Receipts in Excess of \$100 Must be Itemized

Candidate/Slate of Candidates/Committee: _____

KREF Filer #: _____ Period From: ____/____/____ To: ____/____/____

1. Caucus Campaign Committee Name and Address	2. Date of Receipt	3a. Contribution by Check or Written Instrument	3b. Description and Value of In-Kind	4. Cumulative for Election (per Contributor)
	____/____/____			
	____/____/____			
	____/____/____			
	____/____/____			
	____/____/____			

SUBTOTAL THIS PAGE**5. Total Cash and Unitemized Caucus Campaign Committee Contributions**

Cash _____ + Unitemized _____ =

Number of Cash Receipts _____ Number of Unitemized Receipts _____

TOTAL THIS PERIOD
(Only on last page of Schedule)

\$ _____

Enter this total on Col. 1,
line 1h of Summary Page

\$ _____

Enter this total on Col. 1,
line 4d of Summary Page

ITEMIZED DISBURSEMENTS SCHEDULE 2

Page ____ of ____

Candidate/Slate of Candidates/Committee: _____

KREF Filer #: _____ Period From: ____/____/____ To: ____/____/____

1. Name and Address of Person or Business Paid List Occupation if Paid to a Person	2. Purpose of Disbursement (Be specific)	3. Date of Disbursement	4. Amount Disbursed
		____/____/____	
		____/____/____	
		____/____/____	
		____/____/____	
		____/____/____	
		____/____/____	
		____/____/____	

SUBTOTAL THIS PAGE	
TOTAL THIS PERIOD (Only on last page of Schedule)	Enter this total on Col. 1, line 3 of Summary Page

EVENTS SCHEDULE 3

Page ____ of ____

Candidate/Slate of Candidates/Committee: _____

KREF Filer #: _____ Period From: ____/____/____ To: ____/____/____

1. Sponsor of Event and Address where the Event was Held	2. Type of Fundraising Activity or Event	3. Date Event was Held	4. Total Amount Received	5. Cost of Event
		____/____/____		
		____/____/____		
		____/____/____		
		____/____/____		
		____/____/____		
		____/____/____		

NOTE: Each fundraising activity or event must be listed separately. This schedule must be filed with the Election Finance Statement covering the period in which the fundraising activity or event took place, and is for informational purposes only. All receipts must be itemized on Schedule 1A, Schedule 1B, Schedule 1C, Schedule 1D or be included in unitemized, cash, or anonymous totals on the Summary Page. All costs incurred in connection with fundraising activities or events must be included on Schedule 2, or as in-kind contributions on Schedule 1A.

DEBTS & OBLIGATIONS SCHEDULE 4

Page ____ of ____

Candidate/Slate of Candidates/Committee: _____

KREF Filer #: _____ Period From: ____/____/____ To: ____/____/____

1. Name and Mailing Address of Party to Whom Debt is Owed	2. Type of Obligation	3. Date Incurred	4. Original Amount	5. Prior Payment	6. Payment made this reporting period	7. Outstanding Balance at close of this period
		____/____/____				
		____/____/____				
		____/____/____				
		____/____/____				
		____/____/____				
		____/____/____				

NOTE: If you have debts or obligations, this schedule must be filed with every Election Finance Statement with reportable activity (contributions and/or expenditures) up to and including the period in which all debts are paid or assumed.

The candidate/slate of candidates may convert outstanding obligations or debt to candidate contribution by personally assuming the debt. If you wish to assume debt outstanding from your campaign, please execute the Certificate of Debt Assumption below.

SUBTOTAL THIS PAGE	\$ _____
TOTAL THIS PERIOD (Only on last page of Schedule)	\$ _____ <small>Enter this total on line 5 "Total Debts and Obligations" on the Summary Page</small>

CERTIFICATE OF DEBT ASSUMPTION		Amount Assumed by Candidate (Only when closing campaign account) \$ _____
I hereby assume personal responsibility for payment of all outstanding campaign debts for this election.		
SIGNATURE _____	DATE _____	